SKY VIEW NURSING CENTER

300 VILLA DRIVE

| HURLEY 54534 Phone: (715) 561-5646 | i | Ownership: | Individual |
|---|-----|-----------------------------------|--------------|
| Operated from 1/1 To 12/31 Days of Operation: | 366 | Highest Level License: | Intermediate |
| Operate in Conjunction with Hospital? | No | Operate in Conjunction with CBRF? | No |
| Number of Beds Set Up and Staffed (12/31/04): | 36 | Title 18 (Medicare) Certified? | No |
| Total Licensed Bed Capacity (12/31/04): | 36 | Title 19 (Medicaid) Certified? | Yes |
| Number of Residents on 12/31/04: | 34 | Average Daily Census: | 33 |

| Services Provided to Non-Residents | | Age, Gender, and Primary Di | agnosis | of Residents (1 | 12/31/04) | Length of Stay (12/31/04) | % |
|---|--|--|--|---|---|---|---|
| Home Health Care | No | Primary Diagnosis | * | Age Groups | · | Less Than 1 Year | 44.1 |
| Supp. Home Care-Personal Care | No | | | | | 1 - 4 Years | 41.2 |
| Supp. Home Care-Household Services | No | Developmental Disabilities | 5.9 | Under 65 | 2.9 | More Than 4 Years | 14.7 |
| Day Services | No | Mental Illness (Org./Psy) | 11.8 | 65 - 74 | 0.0 | | |
| Respite Care | No | Mental Illness (Other) | 47.1 | 75 - 84 | 29.4 | | 100.0 |
| Adult Day Care | No | Alcohol & Other Drug Abuse | 0.0 | 85 - 94 | 64.7 | ******** | ****** |
| Adult Day Health Care | No | Para-, Quadra-, Hemiplegic | 0.0 | 95 & Over | 2.9 | Full-Time Equivalen | 5 |
| Congregate Meals | No | Cancer | 0.0 | | | Nursing Staff per 100 Re | sidents |
| Home Delivered Meals | No | Fractures | 2.9 | | 100.0 | (12/31/04) | |
| Other Meals | No | Cardiovascular | 17.6 | 65 & Over | 97.1 | | |
| Transportation | No | Cerebrovascular | 0.0 | | | RNs | 7.6 |
| Referral Service | No | Diabetes | 8.8 | Gender | % | LPNs | 10.4 |
| Other Services | No | Respiratory | 5.9 | | | Nursing Assistants, | |
| Provide Day Programming for | | Other Medical Conditions | 0.0 | Male | 47.1 | Aides, & Orderlies | 30.1 |
| Mentally Ill | No | | | Female | 52.9 | | |
| Provide Day Programming for | | | 100.0 | | | | |
| Developmentally Disabled | No | | | | 100.0 | | |
| Supp. Home Care-Personal Care Supp. Home Care-Household Services Day Services Respite Care Adult Day Care Adult Day Health Care Congregate Meals Home Delivered Meals Other Meals Transportation Referral Service Other Services Provide Day Programming for Mentally Ill Provide Day Programming for | No N | Developmental Disabilities Mental Illness (Org./Psy) Mental Illness (Other) Alcohol & Other Drug Abuse Para-, Quadra-, Hemiplegic Cancer Fractures Cardiovascular Cerebrovascular Diabetes Respiratory | 5.9 11.8 47.1 0.0 0.0 2.9 17.6 0.0 8.8 5.9 0.0 | Under 65 65 - 74 75 - 84 85 - 94 95 & Over 65 & Over | 2.9 0.0 29.4 64.7 2.9 100.0 97.1 % | 1 - 4 Years More Than 4 Years ***************** Full-Time Equivalen Nursing Staff per 100 Res (12/31/04) RNs LPNs Nursing Assistants, | 41.2 14.7 100.0 ******** Sidents 7.6 10.4 |

Method of Reimbursement

| | | edicare itle 18 | | | edicaid itle 19 | | Other | | Private Pay | | Family Care | | | Managed Care | | | | | | |
|--------------------|------|--------------------|---------------------|-----|--------------------|---------------------|-------|-----|---------------------|-----|----------------|---------------------|-----|-----------------|---------------------|-----|-----|---------------------|-------------------------|-------|
| Level of Care | No. | % | Per Diem (\$) | No. | ુ જ | Per Diem (\$) | No. | % | Per Diem (\$) | No. | % | Per Diem (\$) | No. | % | Per Diem (\$) | No. | % | Per Diem (\$) | Total Resi- dents | - Of |
| Int. Skilled Care | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 |
| Skilled Care | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 |
| Intermediate | | | | 28 | 96.6 | 90 | 0 | 0.0 | 0 | 5 | 100.0 | 134 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 33 | 97.1 |
| Limited Care | | | | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 |
| Personal Care | | | | | | | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 |
| Residential Care | | | | | | | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 |
| Dev. Disabled | | | | 1 | 3.4 | 141 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 1 | 2.9 |
| Traumatic Brain In | j 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 |
| Ventilator-Depende | nt 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 |
| Total | 0 | 0.0 | | 29 | 100.0 | | 0 | 0.0 | | 5 | 100.0 | | 0 | 0.0 | | 0 | 0.0 | | 34 | 100.0 |

SKY VIEW NURSING CENTER

| Admissions, Discharges, and | | Percent Distribution | n of Residents' | Condit | ions, Services, ar | nd Activities as of 12/ | 31/04 |
|--------------------------------|------|----------------------|-----------------|--------|--------------------|-------------------------|-----------|
| Deaths During Reporting Period | | | | | | | |
| | | | | | % Needing | | Total |
| Percent Admissions from: | | Activities of | 8 | As | sistance of | % Totally | Number of |
| Private Home/No Home Health | 56.7 | Daily Living (ADL) | Independent | One | e Or Two Staff | Dependent | Residents |
| Private Home/With Home Health | 6.7 | Bathing | 26.5 | | 73.5 | 0.0 | 34 |
| Other Nursing Homes | 26.7 | Dressing | 41.2 | | 55.9 | 2.9 | 34 |
| Acute Care Hospitals | 10.0 | Transferring | 73.5 | | 26.5 | 0.0 | 34 |
| Psych. HospMR/DD Facilities | 0.0 | Toilet Use | 52.9 | | 47.1 | 0.0 | 34 |
| Rehabilitation Hospitals | 0.0 | Eating | 76.5 | | 23.5 | 0.0 | 34 |
| Other Locations | 0.0 | ******* | ****** | ***** | ****** | ************* | ****** |
| Total Number of Admissions | 30 | Continence | | % | Special Treatmer | nts | % |
| Percent Discharges To: | | Indwelling Or Extern | nal Catheter | 0.0 | Receiving Resp | oiratory Care | 0.0 |
| Private Home/No Home Health | 3.1 | Occ/Freq. Incontiner | nt of Bladder | 17.6 | Receiving Trac | cheostomy Care | 0.0 |
| Private Home/With Home Health | 18.8 | Occ/Freq. Incontiner | nt of Bowel | 0.0 | Receiving Suct | ioning | 0.0 |
| Other Nursing Homes | 50.0 | į | | | Receiving Osto | omy Care | 0.0 |
| Acute Care Hospitals | 0.0 | Mobility | | | Receiving Tube | Feeding | 0.0 |
| Psych. HospMR/DD Facilities | 0.0 | Physically Restraine | ed | 2.9 | Receiving Mech | nanically Altered Diets | 2.9 |
| Rehabilitation Hospitals | 0.0 | į - | | | | - | |
| Other Locations | 0.0 | Skin Care | | | Other Resident C | Characteristics | |
| Deaths | 28.1 | With Pressure Sores | | 2.9 | Have Advance I | Directives | 76.5 |
| Total Number of Discharges | | With Rashes | | 0.0 | Medications | | |
| (Including Deaths) | 32 | | | | Receiving Psyc | choactive Drugs | 61.8 |

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

| *************************************** | | | | | | | | | | | |
|--|----------|------------------|---------|------|-------|------|-----------|-------|--------|--|--|
| | | Owne | ership: | Bed | Size: | Lic | ensure: | | | | |
| | This | This Proprietary | | | er 50 | Int | ermediate | Al | 1 | | |
| | Facility | Peer | Group | Peer | Group | Peer | Group | Faci | lities | | |
| | ફ | % | Ratio | % | Ratio | % | Ratio | % | Ratio | | |
| Occupancy Rate: Average Daily Census/Licensed Beds | 91.7 | 81.9 | 1.12 | 89.3 | 1.03 | 91.7 | 1.00 | 88.8 | 1.03 | | |
| Current Residents from In-County | 55.9 | 72.8 | 0.77 | 69.8 | 0.80 | 55.9 | 1.00 | 77.4 | 0.72 | | |
| Admissions from In-County, Still Residing | 30.0 | 18.7 | 1.61 | 25.5 | 1.17 | 30.0 | 1.00 | 19.4 | 1.55 | | |
| Admissions/Average Daily Census | 90.9 | 151.4 | 0.60 | 99.1 | 0.92 | 90.9 | 1.00 | 146.5 | 0.62 | | |
| Discharges/Average Daily Census | 97.0 | 151.2 | 0.64 | 97.4 | 1.00 | 97.0 | 1.00 | 148.0 | 0.66 | | |
| Discharges To Private Residence/Average Daily Census | 21.2 | 74.0 | 0.29 | 36.5 | 0.58 | 21.2 | 1.00 | 66.9 | 0.32 | | |
| Residents Receiving Skilled Care | 0.0 | 95.3 | 0.00 | 82.6 | 0.00 | 0.0 | 0.00 | 89.9 | 0.00 | | |
| Residents Aged 65 and Older | 97.1 | 94.3 | 1.03 | 91.9 | 1.06 | 97.1 | 1.00 | 87.9 | 1.10 | | |
| Title 19 (Medicaid) Funded Residents | 85.3 | 71.9 | 1.19 | 70.2 | 1.21 | 85.3 | 1.00 | 66.1 | 1.29 | | |
| Private Pay Funded Residents | 14.7 | 16.7 | 0.88 | 17.0 | 0.86 | 14.7 | 1.00 | 20.6 | 0.72 | | |
| Developmentally Disabled Residents | 5.9 | 0.6 | 9.42 | 0.9 | 6.91 | 5.9 | 1.00 | 6.0 | 0.97 | | |
| Mentally Ill Residents | 58.8 | 29.5 | 1.99 | 59.1 | 0.99 | 58.8 | 1.00 | 33.6 | 1.75 | | |
| General Medical Service Residents | 0.0 | 23.5 | 0.00 | 9.8 | 0.00 | 0.0 | | 21.1 | 0.00 | | |
| Impaired ADL (Mean) | 24.1 | 46.4 | 0.52 | 50.6 | 0.48 | 24.1 | 1.00 | 49.4 | 0.49 | | |
| Psychological Problems | 61.8 | 54.5 | 1.13 | 52.8 | 1.17 | 61.8 | 1.00 | 57.7 | 1.07 | | |
| Nursing Care Required (Mean) | 0.7 | 7.4 | 0.10 | 5.4 | 0.14 | 0.7 | 1.00 | 7.4 | 0.10 | | |